10/16/2007 16:06

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Dermatology Association Political Action Committee 1350 I St NW ADDRESS (number and street) Ste 870 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00359539 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2007 09 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Steven Debnar Type or Print Name of Treasurer Electronically Filed by Steven Debnar 10 16 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Academy of Dermatology Association Political Action Committee [®] D " D 0.9 0 1 2007 0.9 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 178898.71 January 1 (b) Cash on Hand at 228574.83 Begining of Reporting Period 22030.00 235151.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 250604.83 414049.71 6(a) and 6(c) for Column B) 46982.40 210427.28 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 203622.43 203622.43 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee

м м 0 9

Report Covering the Period:

From:

01

^Y 2 0 0 7

To:

м м 0 9 ^D 3^D 0

2007

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	18930.00	195991.00
	(ii) Unitemized	3100.00	39160.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	22030.00	235151.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	22030.00	235151.00
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	22030.00	235151.00
	Total Federal Receipts (subtract Line 18(c) from Line 19)	22030.00	235151.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBI	URSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Exp			
	ederal/Non-Federal rom Schedule H4)	0.00	0.00
• •	eral Share	0.00	0.00
(**) Na	Factorial Observa	0.00	0.00
` '	-Federal Sharederal Operating	0.00	0.00
	ures	482.40	4427.28
	erating Expenditures		
, ,	a)(i), (a)(ii) and (b))	482.40	4427.28
	ffiliated/Other Party	0.00	0.00
Contributions	to	0.00	0.00
Federal Candi	dates/Committees	46500.00	204000.00
4. Independent E			
(use Schedule	e E)	0.00	0.00
Committees (2	expenditures Made by Party 2 U.S.C. 441a(d))	0.00	0.00
(use Schedule	e F)	0.00	
	ents Made	0.00	0.00
7. Loans Made 8. Refunds of Co	ontributions To:	0.00	0.00
(a) Individual	ls/Persons Other	0.00	2000.00
Than Pol	itical Committees	0.00	2000.00
(b) Political F	Party Committees	0.00	0.00
` '	litical Committees	0.00	0.00
•	PACs) htribution Refunds	0.00	0.00
` '	es 28(a), (b), and (c))	0.00	2000.00
9. Other Disburs	ements	0.00	0.00
0. Federal Electi	on Activity (2 U.S.C 431(20))		
. ,	ederal Election Activity		
(from Sch	′	0.00	0.00
(I) Federa	al Share		
(ii) "Levir	n" Share	0.00	0.00
(b) Federal E	lection Activity Paid Entirely	0.00	0.00
With Fede	eral Funds	0.00	0.00
(c) Total Fed	eral Election Activity (add	0.00	0.00
Lines 30	0(a)(i), 30(a)(ii) and 30(b))		
1 Total Diabura	ements (add Lines 21(c), 22,		
	6, 27, 28(d), 29 and 30(c))	46982.40	210427.28
20, 24, 20, 20	, L1, L0(a), L0 and 00(b))		
2. Total Federal	Disbursements		
(subtract Line	21(a)(ii) from Line 30(a)(ii)		
		46982.40	210427.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	22030.00	235151.00
34. Total Contribution Refunds (from Line 28(d))	0.00	2000.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22030.00	233151.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	482.40	4427.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	482.40	4427.28

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso	ociation Po	olitical Action Committee	
۹.	Full Name (Last, First, Middle Initial) Peter Bouman			Date of Receipt
	Mailing Address 44 Ridge Rd			09 21 2007
	City	State	Zip Code	Transaction ID: 73c82fa94a3d740496f
	Portland	ME	04103-4715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Bates Mill Dermatology, PLLC	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Jean Braun			Date of Receipt
	Mailing Address Lower Level 105 Bierer Ln			0 9 2 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 5200cb26eb3379d5976
	Uniontown	PA	15401-3117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self Employed	Occupation Physician		
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼		250.00	
) .	Full Name (Last, First, Middle Initial) Brian Cheshire			Date of Receipt
	Mailing Address 103 Pinetop Cir W			09 / 27 / 2007
	City	State	Zip Code	Transaction ID: eacc46f4b9342acb81a
	<u>Fairhope</u>	AL	36532-3374	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Bay Shore Dermatology, PC	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
9	UBTOTAL of Receipts This Page (optional)			1250.00
_				

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/29	4
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12	
-			Detailed Summary Page	13 14 15 16 17	,
Ar or	y information copied from such Reports and Statement for commercial purposes, other than using the name ar	nts may i	not be sold or used by any perso	n for the purpose of soliciting contributions	1
<u> </u>	NAME OF COMMITTEE (In Full)		, p		\exists
\rangle	American Academy of Dermatology Associati	tion Po	litical Action Committee		
۹.	Full Name (Last, First, Middle Initial) Grace Chung			Date of Receipt	
	Mailing Address 123 Muirfield Ct			09 18 YYYY 2007	
	•	tate	Zip Code	Transaction ID: 993e291b6d0b3ab632	4
	Moorestown NJ	J	08057-3954	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			500.00	
	Woodhury Medical Center	cupation ysician			
		•	Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
3.	Full Name (Last, First, Middle Initial) Lloyd Cleaver			Date of Receipt	_
	Mailing Address PO Box 7545			09 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	•	tate	Zip Code	Transaction ID: DF9967C4-9D51-47E4	
	Kirksville MC	10	63501-7545	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			500.00	
	Self Employed	cupation			
	FIIY	ysician grogato \	Year-to-Date ▼	-	
	Primary General	gregate	rear-10-Date V		
	Other (specify) ▼		500.00		
Э.	Full Name (Last, First, Middle Initial) Chalmers Cornelius			Date of Receipt	
	Mailing Address 1 Andover Rd			09 28 2007	
	,	tate	Zip Code	Transaction ID: a82ec513d7b35eae610)
	Haverford PA	<u> </u>	19041-1002	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			250.00	
	Brun Maur Skin & Canaar	cupation		7	
	Inst.	ysician			
	Receipt For: Agg Primary General	gregate `	Year-to-Date ▼		
	Other (specify)		250.00		
s	UBTOTAL of Receipts This Page (optional)			1250.00	
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T	OTAL This Period (last page this line number only)		•		

SCHEDULE A (FEC Fo	rm 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 29
TEMIZED RECEIPTS	•	or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such R or for commercial purposes, other the	eports and Statements may an using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Academy of Dern	natology Association P	olitical Action Committee	
Full Name (Last, First, Middle Ini Jorge Crespo	tial)		Date of Receipt
Mailing Address 32 Foley Ro			09 / 25 / 2007
City	State	Zip Code	Transaction ID: 7f2f62ddc30c3b05bab
<u>Chesterfield</u>	NH	03443-3801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed	Occupation Physician		7
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Ini 3. Terrence Cronin	tial)		Date of Receipt
Mailing Address 495 Spoonb	ill Ln		09 25 2007
City	State	Zip Code	Transaction ID: 5ff410dfe4cf319a543
Melbourne Beach	FL	32951-3269	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self Employed	Occupation		
Receipt For:	Dermatol	e Year-to-Date 🔻	_
Primary General	Aggregate		1
Other (specify) ▼	0 0	500.00]
Full Name (Last, First, Middle Ini Anh Dang-Vu	tial)		Date of Receipt
Mailing Address 12808 Tour	nament Dr		09 25 7 2007
City	State	Zip Code	Transaction ID: 97ee49a980501b484a7
Reston	VA	20191-5860	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed	Occupation Dermatol		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary ☐ General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page	e (optional)		1000.00
, -9-		'	
TOTAL This Period (last page this	line number only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 29
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Dermatology As	sociation P	olitical Action Committee	
Full Name (Last, First, Middle Initial) Tami DeAraujo Mailing Address Apt 1109 1688 West Ave City Miami Beach FEC ID number of contributing federal political committee. Name of Employer Dermatology and Laser Center	State FL C Occupation Dermatol	ogist	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Scott DeBates Mailing Address 22398 Burr Oak Cir			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 61304f6b6659a4bf5f7
Gretna	NE	68028-4858	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Methodist Physicians Clin- ic	Occupation Physician	1	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) James DeBloom			Date of Receipt
Mailing Address 6 Cricken Tree Dr			0 9 1 9 2 0 0 7
City	State	Zip Code	Transaction ID: 4307053e38042075854
Simpsonville	SC	29681-5258	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer South Carolina Skin Cancer Center Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
SUBTOTAL of Receipts This Page (optional)			750.00
TOTAL This Period (last page this line number of	only))	

S	CHEDULE A (FEC Form 3X)		Llee concrete cobodulo(o)	FOR LINE NUMBER: PAGE 10 / 29	
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)	
•	EWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
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An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
$\overline{}$	NAME OF COMMITTEE (In Full)				
\rangle	American Academy of Dermatology Ass	sociation P	olitical Action Committee		
۹.	Full Name (Last, First, Middle Initial) Robert Durst			Date of Receipt	
	Mailing Address 7310 SW Robins Dr			09 / 27 / Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: d2eeca208c61913e7	d7
	Topeka	KS	66610-1548	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self Employed	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		700.00		
	Other (specify)	0 0	700.00		
3.	Full Name (Last, First, Middle Initial) Douglas Farris			Date of Receipt	
	Mailing Address 3909 Eagle Lake Ct			09 / 28 / 2007	
	City	State	Zip Code	Transaction ID: 4cfda44db09fb42bc3	5
	Arlington	TX	76016-3800	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		500.00	
	Name of Employer Northeast Tarrant Dermato-	Occupation			
	logy	Dermatol		4	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		500.00		
_	Full Name (Last, First, Middle Initial)			5. (5.)	
j.	Roger Golomb			Date of Receipt	
	Mailing Address 18 Winston Dr			09 25 2007	
	City	State	Zip Code	Transaction ID: d1ce7c9ef42a055414	18
	Belleair	<u>FL</u>	33756-1646	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self Employed	Occupation Dermatol			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
s	LUBTOTAL of Receipts This Page (optional)			1500.00	
_					Ī
T	OTAL This Period (last page this line number o	nly)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/29
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Sta	tements may	not be sold or used by any perso	
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Dermatology Ass	ociation P	olitical Action Committee	
Full Name (Last, First, Middle Initial) Jeffrey Grant			Date of Receipt
Mailing Address 4522 E Mountain View F	Rd		09 26 2007
City	State	Zip Code	Transaction ID: 24a0f373dea92f14072
Phoenix	AZ	85028-5214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed	Occupation Physician		
Receipt For:		e Year-to-Date ▼	7
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) 3. Armando Guardiola			Date of Receipt
Mailing Address De Diego Number 102 E			09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 55aa3c52f7088e2c1e6
Mayaguez	PR	00680-4700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Self Employed	Occupation		7
	Physicia		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
Other (specify) ▼		750.00	
Full Name (Last, First, Middle Initial) Robert Henderson			Date of Receipt
Mailing Address 4032 Lambert Trl			09 / 14 / 2007
City	State	Zip Code	Transaction ID: c9bd1dcb302d83d28c5
Birmingham	AL	35242-7487	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Shelby Dermatology PC	Occupation		7
	Dermato		4
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number or	าly))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 29 (check only one) X 11a 11b 11c 12
Ar or	ry information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Dermatology Ass			
A .	Full Name (Last, First, Middle Initial) Anthony Janiga Mailing Address 2004 Palmer Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M A 28 2007 Transaction ID: bbf0249fd7e15b1fe6f Amount of Each Receipt this Period 365.00
3.	Full Name (Last, First, Middle Initial) Joseph Jensen Mailing Address Ste 201 7396 Union Park Ave City Midvale FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State UT C Occupation Physician Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: ba32acff61c10cbfd0c Amount of Each Receipt this Period 500.00
C .	Full Name (Last, First, Middle Initial) Aaron Katz Mailing Address 509 Spaulding Lake Dr City Greenville FEC ID number of contributing federal political committee. Name of Employer Spartanburg Dermatology& Skin Surgery Receipt For: Primary General Other (specify)	State SC C Occupation Physician Aggregate		Date of Receipt M M M / D D / 25 / 2007 Transaction ID: 0f8b3eff70557361db5 Amount of Each Receipt this Period 500.00
s	UBTOTAL of Receipts This Page (optional)		>	1365.00
т	OTAL This Period (last page this line number or	nlv))	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/29
TEMIZED RECEIPTS			or each category of the	(check only one)
• • •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
/	American Academy of Dermatology Asso	ociation Po	olitical Action Committee	
۹.	Full Name (Last, First, Middle Initial) Kenneth Katz			Date of Receipt
	Mailing Address 9801 Lake Shore Rd			09 06 7 2007
	City	State	Zip Code	Transaction ID: 6478c98f633cfa290c7
	Newton	WI	53063-9508	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Dermatology Associates of	Occupation Dermatol		
	Wisconsin Receipt For:		e Year-to-Date ▼	-
	Primary General	riggregate	Total to Bate V	1
	Other (specify) ▼	0 0	600.00	
3.	Full Name (Last, First, Middle Initial) Kenneth Katz			Date of Receipt
	Mailing Address 9801 Lake Shore Rd			09 06 2007
	City	State	Zip Code	Transaction ID: cbcd582ac410df4c4f3
	Newton	WI	53063-9508	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Dermatology Associates of	Occupation	1	
	Wisconsin	Dermatol		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
	Full Name (Last, First, Middle Initial)			
Э.	Neil Korman			Date of Receipt
	Mailing Address Department of Dermatolo 11100 Euclid Ave	gy		09 13 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 03829c5f108673c682c
	Cleveland	OH	44106-1736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer University Hospitals	Occupation	ı	7
		Dermatol		_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	_ · · ·	500.00	
	Other (specify) ▼	0 0		
SI	JBTOTAL of Receipts This Page (optional)			1100.00
T	This Period (last nage this line number only	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso	ociation P	olitical Action Committee	
A .	Full Name (Last, First, Middle Initial) Jeff Ligon Mailing Address 112 S Bragg Ave City Lookout Mountain FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State TN C Occupation Dermatol Aggregate		Date of Receipt M M M / 28 / 2007 Transaction ID: 3bf2b0f41d6c263ca46 Amount of Each Receipt this Period 300.00
3.	Full Name (Last, First, Middle Initial) Ronald Mann Mailing Address 7354 E Valley Lights PI City Tucson FEC ID number of contributing federal political committee. Name of Employer	State AZ C	Zip Code 85750-6267	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	•	n - Dermatologist e Year-to-Date ▼ 365.00	
D.	Full Name (Last, First, Middle Initial) Beno Michel Mailing Address 5 Hampton Ct City Beachwood FEC ID number of contributing federal political committee.	State OH	Zip Code 44122-7503	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Dermatol Aggregate		
s	UBTOTAL of Receipts This Page (optional)			915.00
T	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/29						
	EMIZED RECEIPTS		or each category of the	(check only one)						
••	LIVIIZED REGEN 10		Detailed Summary Page		11c 12 15 16 17					
Δr	by information copied from such Reports and State	ements may	v not be sold or used by any perso							
or	y information copied from such Reports and State for commercial purposes, other than using the name	me and add	dress of any political committee to	solicit contributions from suc	ch committee.					
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)									
\rangle	American Academy of Dermatology Asso	ciation P	olitical Action Committee							
۹.	Full Name (Last, First, Middle Initial) Matthew Miller			Date of Receipt						
	Mailing Address 35 Woodvale Ave			09 / 13 /	2007					
	City	State	Zip Code	Transaction ID: 63f65						
	Greenville	SC	29605-1130	Amount of Each Recei	pt this Period					
	FEC ID number of contributing federal political committee.	C			500.00					
	Professional Médical Cont	Occupation Physician		7						
	Receipt For:		Year-to-Date ▼							
	Primary General		500.00							
	Other (specify) ▼	0 0	500.00							
3.	Full Name (Last, First, Middle Initial) John Miner			Date of Receipt						
	Mailing Address 4721 Old Grand River Trl	NE		09 / 25	2007					
	City	State	Zip Code	Transaction ID: acb8	8a2be44565d4a96					
	Ada	MI	49301-8615	Amount of Each Recei	pt this Period					
	FEC ID number of contributing federal political committee.	С			500.00					
	Name of Employer Dermatology Associates of	Occupation	า							
	West MI	Physiciar								
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General Other (specify) ▼	' '	500.00							
			0 0 0 0 0 0 0							
Э.	Full Name (Last, First, Middle Initial) Rebekah Oyler			Date of Receipt						
	Mailing Address 1513 Tradescant Ct			09 / 27	2007					
	City	State	Zip Code	Transaction ID: 32cf2						
	Raleigh	NC	27613-7459	Amount of Each Recei	pt this Period					
	FEC ID number of contributing federal political committee.	С			250.00					
	Name of Employer	Occupation	1							
	Andrus & Associates Dermatology	Physiciar	1							
	Receipt For:	Aggregate	Year-to-Date ▼							
Primary General			250.00							
	Other (specify) ▼	0 0	0 0 0 0 0 0 0							
s	UBTOTAL of Receipts This Page (optional)				1250.00					
<u> </u>	OTAL This Daving (less sages this line seconds are all									
- 1	OTAL This Period (last page this line number only	y <i>)</i>	··············							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/29						
ITEMIZED RECEIPTS			or each category of the	(check only one)						
•	LIMIZED REGEN 13		Detailed Summary Page	 	1b 11c 12 4 15 16 17					
Δr	w information copied from such Reports and States	mente may	not he sold or used by any nerso							
or	y information copied from such Reports and States for commercial purposes, other than using the nam	ne and add	lress of any political committee to	solicit contributions	s from such committee.					
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
\rangle	American Academy of Dermatology Associ	ciation Po	olitical Action Committee							
۹.	Full Name (Last, First, Middle Initial) Julia Padgett			Date of Rece	sipt					
	Mailing Address 12805 Saddleseat PI			0 9	25 2007					
	City	State	Zip Code	Transaction	ID: 664acc11c2085dc10e5					
	Richmond	VA	23233-7687	Amount of Ea	ach Receipt this Period					
	FEC ID number of contributing federal political committee.	C			250.00					
	University of Virginia	Occupation Physician								
			Year-to-Date ▼	7						
	Primary General Other (specify) ▼		250.00							
3.	Full Name (Last, First, Middle Initial) Louis Palmer			Date of Rece	eipt					
	Mailing Address 105 Doctors Dr			09	17 2007					
	City	State	Zip Code	Transaction	ID: 246f566914eac38dc09					
	Bridgeport	WV	26330-1720	Amount of Ea	ach Receipt this Period					
	FEC ID number of contributing federal political committee.	С			250.00					
	Self Employed	Occupation								
		Dermatol	<u> </u>	_						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)	0 0	250.00							
Э.	Full Name (Last, First, Middle Initial) William Paull			Date of Rece	eipt					
	Mailing Address 6411 Mountain Brook Dr			09	19 2007					
	City	State	Zip Code	Transaction	ID: 67d06b9457ec56c32de					
	Columbus	GA	31904	Amount of Ea	ach Receipt this Period					
	FEC ID number of contributing federal political committee.	С			1000.00					
	Columbus D'ormotology	Occupation Physician								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼	0 0	1000.00							
s	UBTOTAL of Receipts This Page (optional))		1500.00					
т.	OTAL This Period (last page this line number only)								
	CIAL THIS I GHOW (18St page this line number only	,	······································							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 29						
ITEMIZED RECEIPTS		or each category of the	(check only one)						
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and St.	atements may	v not be sold or used by any perso							
Any information copied from such Reports and Stror for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
American Academy of Dermatology As	sociation P	olitical Action Committee							
Full Name (Last, First, Middle Initial) Vicente Quintero			Date of Receipt						
Mailing Address 1790 Oak GIn			09 26 2007						
City	State	Zip Code	Transaction ID: 99956c401225cc5b01e						
New Braunfels	TX	78132-3839	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		500.00						
Name of Employer Hill Country Dermatology	Occupation Physician								
Receipt For:		e Year-to-Date ▼	7						
Primary General Other (specify) ▼		500.00							
Full Name (Last, First, Middle Initial) 3. Hiram Ruiz			Date of Receipt						
Mailing Address Ste 907 1845 Carr 2			09 / 25 / Y Y Y Y Y Y						
City	State	Zip Code	Transaction ID: 4bfbf1d115ac87afade						
Bayamon	PR	00959-7206	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		1000.00						
Name of Employer Derma Surgery	Occupation								
Receipt For:	Dermato	logist e Year-to-Date ▼	-						
Primary General	Aggregate		1						
Other (specify) ▼		1000.00							
Full Name (Last, First, Middle Initial) Robert Schoenfeld			Date of Receipt						
Mailing Address 1194 Fairfax St			09 / 25 / Y Y Y Y Y Y Y						
City	State	Zip Code	Transaction ID: 64454d2afcbb0dee6a5						
Birmingham	MI	48009-1033	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer Self Employed	Occupation								
Receipt For:	Dermato	logist e Year-to-Date ▼	\dashv						
Primary General	Aggregate		1						
Other (specify) ▼	0 0	250.00							
SUBTOTAL of Receipts This Page (optional)			1750.00						
TOTAL This Period (last page this line number of	only))							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/29						
	EMIZED RECEIPTS		or each category of the	(check only one)						
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1	7					
Ar	ny information copied from such Reports and State	ments mav	not be sold or used by any perso		_					
or	ny information copied from such Reports and State for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
/	American Academy of Dermatology Asso	ciation Po	olitical Action Committee							
۹.	Full Name (Last, First, Middle Initial) Kristina Shaffer			Date of Receipt						
	Mailing Address 852 Osceola Ave			09 / 26 / Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: b2305aedbf065a01cc4	ł					
	Saint Paul	MN	55105-3328	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Solf Employed 1	Occupation Dermatol								
	Receipt For:		Year-to-Date ▼	1						
	Primary General		250.00							
	Other (specify) ▼		250.00							
3.	Full Name (Last, First, Middle Initial) Kimberly Skaff	Date of Receipt								
	Mailing Address 1879 Louden Heights Rd			09 / 19 / 2007						
	City	State	Zip Code	Transaction ID: 10ca77b4dbe49de3fd9)					
	Charleston	WV	25314-1564	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Self Employed	Occupation	1	7						
		Dermatol								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		250.00							
	Care (opening) •	0 0								
).	Full Name (Last, First, Middle Initial) Thomas Smith			Date of Receipt						
	Mailing Address 9395 Mount Vernon Cir			09 / 26 / Y Y Y Y						
	City	State	Zip Code	Transaction ID: 80039d14e144ad1906	7					
	Alexandria	VA	22309-3218	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		500.00						
	Accociatos in Dormatology	Occupation Physician								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	' '	500.00							
	Other (specify) ▼		300.00							
s	UBTOTAL of Receipts This Page (optional)			1000.00						
T	OTAL This Period (last page this line number only	v)								
	· · · · · · · · · · · · · · · ·	, ,								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Dermatology Ass	ociation P	olitical Action Committee	
A.	Full Name (Last, First, Middle Initial) Stephen Spencer Mailing Address 4791 Harbor Point Ct City Port Charlotte FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State FL C Occupation Physician Aggregate		Date of Receipt M M M / D D / 2 6 2 0 0 7 Transaction ID: fb510d8da601855a055 Amount of Each Receipt this Period 500.00
3.	Full Name (Last, First, Middle Initial) Deborah Spitz Mailing Address 332 Washington St City Wellesley Hills FEC ID number of contributing federal political committee. Name of Employer Dermatology Specialists of Wellesley Receipt For: Primary General Other (specify)	State MA C Occupation Dermatol Aggregate		Date of Receipt M M / D D D / Y Y Y Y Y Transaction ID: 8463b33bf0e90813ec9 Amount of Each Receipt this Period 300.00
Э.	Full Name (Last, First, Middle Initial) Frederick Stier Mailing Address	State NY C Occupation Dermatol Aggregate		Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)			1300.00
T	OTAL This Period (last page this line number or	nlv)		

SC	CHEDULE A (FEC Form 3X)		Harana and a shadala (a)	FOR LINE NUMBER: PAGE 20 / 29						
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)						
	EINIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
An or	y information copied from such Reports and State or commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
$\overline{}$	NAME OF COMMITTEE (In Full)									
\rangle	American Academy of Dermatology Asso	ociation Po	olitical Action Committee							
۹.	Full Name (Last, First, Middle Initial) Val Pierre Vallat			Date of Receipt						
	Mailing Address Ste 100 3006 Baucom Rd			09 / 20 / Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: 99b3ddf9a29df63b19f						
	Charlotte	NC	28269-6763	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.00						
	Name of Employer University Dermatology, PLLC	Occupation Dermatol								
	Receipt For:		Year-to-Date ▼							
	Primary General		F00.00							
	Other (specify) ▼	0 0	500.00							
3.	Full Name (Last, First, Middle Initial) Patricia Vitale			Date of Receipt						
	Mailing Address 6015 Pioneer Ridge Cir	09 / 25 / Y Y Y Y Y								
	City	State	Zip Code	Transaction ID: 3ea9656c50ecfc77dba						
	Salt Lake City	UT	84108-1609	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Dermatopathology Center	Occupation Physician								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		250.00							
 C.	Full Name (Last, First, Middle Initial) Larry Warner			Date of Receipt						
	Mailing Address 7733 Old Receiver Rd			09 / 26 / Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: 742cf1c5f2f5858b556						
	Frederick	MD	21702-2754	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Self Employed	Occupation Physician								
			Year-to-Date ▼	7						
	Primary General		050.00							
	Other (specify) ▼		250.00							
SI	JBTOTAL of Receipts This Page (optional)			1000.00						
т	OTAL This Period (last page this line number onl	v)								

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 21/29 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Dermatology Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Douglas Wilson Mailing Address 1209 Winslow Way 09 26 2007 City State Zip Code Transaction ID: 26db7a50162c04ad46a Paducah KY 42001-6506 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Blue Grass Dermatology Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Libbyette Wright Date of Receipt Mailing Address 2111 Elmen St 09 2007 13 City State Zip Code Transaction ID: 9545216dae049c6ed05 Houston TX 77019-6801 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer The Skin Surgery Center Occupation Dermatologist of Houston

Aggregate Year-to-Date ▼

500.00

SUBTOTAL of Receipts This Page (optional)	•	750.00
TOTAL This Period (last page this line number only)	•	18930.00

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 22 / 29									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30b							
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full) American Academy of Dermatology Ass			sit contributions	non such committee							
Full Name (Last, First, Middle Initial) American Express			Transaction I Date of Disbur	D: V05675-0019037127494							
Mailing Address PO Box 53852	Mailing Address PO Box 53852										
City Phoenix	State Zip Code AZ 85072-3852		Amount of Eac	ch Disbursement this Period							
Purpose of Disbursement AMEX Fees Candidate Name	[001 Category/		172.27							
	rsement For: Primary General Other (specify)	Type									
Full Name (Last, First, Middle Initial) Merchant Services		Date of Disbur	ID: V64531-0595819354057								
Mailing Address PO Box 6603	Mailing Address PO Box 6603										
City Hagerstown	State Zip Code MD 21741-6603		Amount of Eac	ch Disbursement this Period							
Purpose of Disbursement VS/MC Fee Candidate Name		001 Category/ Type		30.00							
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)	,									
Full Name (Last, First, Middle Initial) Merchant Services			Date of Disbu								
Mailing Address PO Box 6603			09	0 4 Y 2 0 0 7 Y							
City Hagerstown	State Zip Code MD 21741-6603		Amount of Eac	ch Disbursement this Period							
Purpose of Disbursement VS/MC Fee Candidate Name		001		280.13							
	rsement For:	Category/ Type									
Senate President State: District:	Primary General Other (specify) ▼										
SUBTOTAL of Disbursements This Page (optional	al)			482.40							
TOTAL This Period (last page this line number or	ıly)			482.40							

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check onl	= NUMBER: PAGE 23 / 29 lv one)							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 24 28b 28c	25 29	26 30b				
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na						3				
NAME OF COMMITTEE (In Full)	The ariu address of arry political co	ommittee to st	JIICIL COLILIDULI	ons nom such	Committee					
American Academy of Dermatology Ass	ciation Political Action Com	mittee								
Full Name (Last, First, Middle Initial)			Transaction	on ID: 23612	-07185000	18119				
A. Berkley for Congress				sbursement	V V V	V				
Mailing Address 3069 Conquista Court			0 9 M / D 2 8 / Y 2 0 0 7 Y							
City Las Vegas	State Zip Code NV 89121		Amount of	Each Disburs	ement this F	eriod				
Purpose of Disbursement	110 09121				2500.0	00				
Contribution		011								
Candidate Name Shelley Berkley		Category/ Type								
X	sement For: 2008 K Primary General									
President	Other (specify)									
State: NV District: 01										
Full Name (Last, First, Middle Initial) Charles Boustany Jr Md for Congress In				on ID: 23612 sbursement	-25901430	84526				
	,		M M /	28	Ý Ž 0 Ď 7	Υ				
Mailing Address PO Box 80126			0 9	28	2007					
City Lafayette	State Zip Code LA 70598		Amount of	Each Disburs	ement this F	Period				
Purpose of Disbursement	1				1000.0	00				
Contribution Candidate Name		011 Category/								
Charles Boustany		Type								
ů A	sement For: 2008									
Senate President	✓ Primary GeneralOther (specify) ▼									
State: LA District: 07										
Full Name (Last, First, Middle Initial) Citizens for Harkin				on ID: 23612 sbursement	-28019350	76713				
Mailing Address PO Box 811			0 9	D 2 8 /	Ý Ž 0 Ď 7	, Υ				
City	State Zip Code		Amount of	Each Disburs	sement this F	Period				
Des Moines	IA 50304			0 0	4000.0	00				
Purpose of Disbursement Contribution		011			1000.0	,0				
Candidate Name Tom Harkin		Category/ Type								
-	sement For: 2008		-							
X Senate President	✓ Primary GeneralOther (specify) ▼									
State: IA District:	Other (Specify) \									
SUBTOTAL of Disbursements This Page (optional)				7500.0	0				
TOTAL This Period (last page this line number on	y)									

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check on	: NUMBER: PAGE 24 / 29 lv one)							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a		24 28c	25 29	26 30b			
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam										
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any political co	minintee to so	JICIL CONTINDU	uons nom st	ICH COHIM	III.LEE				
American Academy of Dermatology Associ	iation Political Action Com	mittee								
Full Name (Last, First, Middle Initial)			Transact	tion ID: 236	12-3640	86329	9369			
Dave Camp for Congress 2008				Disbursemen		V V	1			
Mailing Address 5915 Eastman Avenue S	Suite 100		09 0 7 28 7 2007							
City Midland	State Zip Code MI 48640		Amount o	of Each Disb	ursement	this Per	riod			
Purpose of Disbursement Contribution	I	011			5	000.00				
Candidate Name Dave Camp		Category/ Type								
X X	ement For: 2008 Primary General Other (specify)									
Full Name (Last, First, Middle Initial)			Troposi	ion ID. 006	10 6060	00444	1040			
3. Friends of Farr				tion ID: 236 Disbursemen	t		1948			
Mailing Address 555 Capitol Mall Suite 1	125		0 9	²⁸	2	0 0 7 [°]				
City Sacramento	State Zip Code CA 95814		Amount o	of Each Disb						
Purpose of Disbursement Contribution	L		. 1	000.00						
Candidate Name Sam Farr		Category/ Type								
Senate X President	ement For: 2008 Primary General Other (specify)									
State: CA District: 17 Full Name (Last, First, Middle Initial)			_							
Friends of Gordon Smith			Date of D	tion ID: 236 Disbursemen	t		1479			
Mailing Address 228 S Washington Suite	115		0 9	²⁸	Ž Ž	0 0 7 [×]				
City Alexandria	State Zip Code VA 22314		Amount o	of Each Disb	ursement	this Per	riod			
Purpose of Disbursement Contribution		011	L.,		3	000.00				
Candidate Name Gordon Smith		Category/ Type								
· — — —	ement For: 2008 Primary General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)					90	00.00				
TOTAL This Period (last page this line number only										

	TILDOLL B (I LOI OIIII 3X)	Use seperate schedule(s)		(check only		= NUMBER: PAGE 25 / 29 Iv one)				9			
ITE	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	A IIY OI	22 X 28a	23 28b	24 28c	П	25 29	_	26 30b	
	Information copied from such Reports and Statem												
	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political	COM	millee lo	SOIICI	CONTRIBU	tions ire	om such	COMM	шиее			
`	American Academy of Dermatology Associ	ation Political Action Co	mmi	ttee									
	Full Name (Last, First, Middle Initial)					Transac	tion ID:	23612-	1110	3457	2124	14	
٦.	Friends of John Barrasso					Date of D			V • V	V	V		
	Mailing Address 6896 Casper Mountain R	oad				099 / 28 / Y 2007							
	•	State Zip Code				Amount of	of Each	Disburse	emen	t this P	eriod		
	Casper Purpose of Disbursement	WY 82601	_			· · ·			5	0.000	0	7	
	Contribution)11								-	
	Candidate Name John Barrasso			egory/ ype									
		ment For: 2008											
	X Senate X President	Primary General Other (specify) ▼											
	State: WY District:												
_	Full Name (Last, First, Middle Initial)					Transac			0556	6042	6616	6	
э.	Friends of Sherrod Brown					Date of D			V * V	V	V		
	Mailing Address PO Box 76187 Suite 800					0 9 M	[′] 2	8 7	ž	0 ŏ 7	Y		
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_	Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign					Transact Date of D			4555	3225	2788	35	
	Mailing Address PO Box 16128					0 ^M 9 M	[/] 2	8 /	ž Ž	0 ŏ 7	Y		
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Mailing Address Post Office Box 5928					9 4	[/] 2	8 /	ž	0 ŏ 7	Y	
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Tammy Baldwin for Congress						rsement			
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Mailing Address 6850 Austin Centre Bould Suite 180	evard			0 9	M / I	28 /	ž	0 Ď 7	
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٩.	Walden for Congress Inc.			Date of Disbursement	
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